

US EPA Region 2 Analysis Request Form

CLP Case/Project #:		Date Received by RSCC:		Date Cancelled:	
Site Name:	Rolling Knolls Landfill Superfund Site	CERCLIS ID:	NJD980505192		
City/Town:	Chatham	Op Unit:	01	Site Spill ID:	NA
State:	NJ	Action Code:	Remedial - BD		
EPA Project Manager:		Analytical Services Requestor:		Sampling Dates:	
First Name:	Tanya	First Name:	Vanessa		Start:
Last Name:	Mitchell	Last Name:	Macwan		Finish:
		Phone #:	17325904706		Saturday Delivery?
		Organization:	CDM Smith		Yes
EPA Approved QAPP?:	Pending	Oversight/Split Sampling?:		Yes	
Date of QAPP Approval:		(e.g. PRP/Fed Facility)			
Approved QAPP DCN:	NA			Labs Used: (by PRP/Fed. Facility)	
				Test America	
E-mail for Lab Assignments:		E-mail for Data:			
macwanvc@cdmsmith.com		macwanvc@cdmsmith.com			
Oxfordjm@cdmsmith.com; Kirchnersf@cdmsmith.c		Oxfordjm@cdmsmith.com; Kirchnersf@cdmsmith.co			
HagermanPR@cdmsmith.com; bennettm@cdmsmit		HagermanPR@cdmsmith.com; bennettm@cdmsmith.			
Contaminants of Concern (if known): VOCs,SVOCs,PCB Arocolors, pesticides, dioxin furans, PCB Congeners, metals, cyanide					
Known Hazardous Waste Constituents: VOCs,SVOCs,PCB Arocolors, pesticides, dioxin furans, PCB Congeners, metals, cyanide					
Special Requests & Reporting Requirements (attach if more space required):					
QAPP submitted November 14, 2014.					
This is an USCACE project.					
** Shaded area for RSCC use only **					

U.S. EPA Region 2
Analysis Request Form

Site Name:		Rolling Knolls Landfill Superfund Site				
# of Samples	Conc. Level (see key)	Matrix (see key)	Analyses	Turnaround Time (for validated data)**	SOW # / Method	Lab Assignment
2	Low	SEDIMENT	VOCs, TCL	42 days	SOM01.2	
2	Low	SEDIMENT	SEMI-VOLATILES, TCL	42 days	SOM01.2	
2	Low	SEDIMENT	SEMI-VOLATILES, SIM	42 days	SOM01.2	
2	Low	SEDIMENT	PESTICIDES, TCL	42 days	SOM01.2	
2	Low	SEDIMENT	PCBs, TCL	42 days	SOM01.2	
2	Low	SEDIMENT	METALS, TAL (ICP-MS) + Hg & CN	42 days	ISM01.3	
2	Low	SEDIMENT	METALS, TAL (ICP-AES)	42 days	ISM01.3	
16	Low	AQUEOUS	VOCs, TCL	42 days	SOM01.2	
9	Low	AQUEOUS	SEMI-VOLATILES, TCL	42 days	SOM01.2	
9	Low	AQUEOUS	SEMI-VOLATILES, SIM	42 days	SOM01.2	
9	Low	AQUEOUS	PESTICIDES, TCL	42 days	SOM01.2	
9	Low	AQUEOUS	PCBs, TCL	42 days	SOM01.2	
10	Low	AQUEOUS	METALS, TAL (ICP-MS) + Hg & CN	42 days	ISM01.3	
10	Low	AQUEOUS	METALS, TAL (ICP-AES)	42 days	ISM01.3	
2	Trace	AQUEOUS	TRACE MERURY	42 days	EPA 1631 E	
2	Low	POREWATER	VOCs, TCL	42 days	SOM01.2	
1	Low	POREWATER	SEMI-VOLATILES, TCL	42 days	SOM01.2	
1	Low	POREWATER	SEMI-VOLATILES, SIM	42 days	SOM01.2	
1	Low	POREWATER	PESTICIDES, TCL	42 days	SOM01.2	
1	Low	POREWATER	PCBs, TCL	42 days	SOM01.2	
2	Low	POREWATER	METALS, TAL (ICP-MS) + Hg & CN	42 days	ISM01.3	
2	Low	POREWATER	METALS, TAL (ICP-AES)	42 days	ISM01.3	

** See instruction sheet for explanation of Turnaround Time for validated data.

Accepted by:		Date Accepted:	
** Shaded area for RSCC use only **			

**Instructions for the Completion of the
"U.S. EPA Region 2 Analytical Services Request Form"**

The following are instructions for the completion of the "U.S. EPA Region 2 Analytical Services Request Form". These instructions should be referred to in order to ensure the request form contains accurate and complete information. Proper completion of the request form will significantly cut down on the time needed to process requests for analytical services. Lab assignments will not be made until form is accurately completed by Analytical Services Requestor and accepted as complete by the Regional Sample Control Coordinator (RSCC).

General Instructions

1. In order to use this form's drop down lists you will need to ENABLE MACROS. When you open the file one of three things could happen:

- If you are not asked anything when you open the file and the macros are fully functional, that means your security level is set **low**. This is dangerous for your computer and it is highly advised that you set your macro security level to **Medium** by following the instructions below.
- If you are given a security warning with the options of disabling or enabling, please click **Enable Macros**.
- If you are given any other error message you need to set your security level to a lower setting. To do this:
 - Click the **"Developer"** tab on the command line.
 - Click the **Macro Security** option within the code group of commands, to the top left corner.
 - Click the **Macro Setting** in the left pane, then select the option that allows you to run imbedded macros in this workbook.
 - Click **OK** button in the bottom right corner.
 - Close the file and reopen it.
 - You should be given a security warning with the option of disabling or enabling, please click **Enable Macros**. The form should now be fully functional.

2. Do not fill out any grayed areas. For RSCC use only

3. For the fields that contain "drop down lists"; information can be manually entered if the required parameter is not provided

4. All requests must be electronically submitted, via e-mail, to: Adly Michael (michael.adly@epa.gov), Jennifer Feranda (feranda.jennifer@epa.gov), Robert Toth (toth.robert@epa.gov) and Agustin Aoanan (aoanan.agustin@epa.gov).

5. The e-mail (transmitting the request) subject line should read: **"Analytical Services Request: (Site Name); (Project Start Date)"**

6. Requests for routine analytical services (RAS) in standard matrices (i.e. water, soil, and sediment), should be submitted to RSCC no later than noon Tuesday, the week prior to the sampling start date.

7. Requests for non-routine analytical services and non-standard matrices (i.e., waste, oil, concrete, fish tissue, etc) should be submitted to the RSCC at least two weeks prior to the sampling start date.

Note that if analyses can not be accommodated by the EPA Regional lab or the CLP, requests should be provided with enough leeway for alternative analytical services to be procured).

8. Once laboratory assignments have been made, the RSCC will forward the lab assignments, shipping addresses and any other relevant information to the designee (see # 24 below) usually by Thursday or Friday prior to the sampling start date. In cases where alternative analytical services are required, the requestor will be notified within a sufficient time frame to procure those services from an outside source.

Project Information

9. **Site Name:** Name of site in which sampling will be conducted. Please DO NOT add any description of the site, such as Superfund site, OU1/2/3, or any additional description.

10. **City/Town:** City or town where site is located.

11. **State:** Type in the State that site is located in, e.g. NY, NJ, PR or VI

12. **CERCLIS ID:** A site identifier starting with the abbreviation for the state in which it is located and followed by several digits i.e., NYD (or NYN)00022999 (NJD (or NJN)XXXXXXXXX, PRD (or PRI)XXXXXXXXX, etc. If a CERCLIS ID has not yet been established for the site, please indicate so on the form.

13. **Operable Unit:** **Drop Down List** - Specific site operable unit (OU) for project (ie. 01, 02, etc). If uncertain as to OU, check with EPA PM. If no OU has been assigned, please indicate by using "00"

14. **Site Spill ID:** A four-digit site identifier (e.g. 02K2). If this is not known, please check with EPA PM, THIS MUST BE PROVIDED.

15. **Action Code:** **Drop Down List** - Please refer to table below for definitions of action codes provided in drop down list.

ACTION CODE	DEFINITION
QB	Remedial Site Assessment
CO	Remedial Combined RI/FS
RD	Remedial Design
RA	Remedial Action
BD	PRP Lead Remedial RI/FS
BE	PRP Lead Remedial Design
BF	PRP Lead Remedial Action
ME	PRP Lead Remedial Long Term Response
FE	Remedial Post Construction Activities
LR	Long Term Remedial Action
RS	Removal Assessment
RV	Removal Action
BB	PRP Lead Removal
OX	Federal Facility Oversight
QB	Federal Facility Site Assessment
PX	Site Specific BRAC

16. **Sampling Dates:** "Start": Date sampling is expected to begin. (i.e., 04/04/08)

"Finish": Date sampling is expected to end (i.e., 04/06/08)

17. **Saturday Delivery:** **Check Box** - Check "yes" if samples are expected to be delivered to the lab(s) on a Saturday.

18. **EPA Project Manager:** "First Name": First name of EPA Project Manager.

"Last Name": Last name of EPA Project Manager

19. **Analytical Service Requestor:** "First Name": First name of person submitting the analytical request form from the field contractor, EPA, state, etc.

"Last Name": Last name of the person submitting the analytical request form from field contractor, EPA, State, etc.

Note: Each sampling organization should have a dedicated point-of-contact (POC) person who submits the analytical requests to the EPA RSCC and serves as point of contact for answering and resolving issues.

20. **Phone #:** Phone number of Sampling Coordinator. Format used should be 1234567899. Please NO parenthesis or dashes.

21. **Organization:** Sampling organization conducting the sampling event (i.e., EPA, name of site contractor, State etc.)

22. **EPA Approved QAPP:** Type in "Yes" if the project has an approved Quality Assurance Project Plan (QAPP). If the QAPP is under review, and NOT approved yet, type in **Pending**.

23. **Date of QAPP Approval:** Provide the date in which the QAPP was approved by the EPA Project Manager. If the QAPP is NOT approved, leave the field blank.

24. **Approved QAPP's DCN:** Provide the document control number (DCN) that was assigned to the QAPP by the preparer.

25. **Oversight/Split Sampling:** Type in "Yes" if samples being collected are oversight or split samples for a PRP/Federal Facility project.

26. **Labs Used:** If the box for "Oversight/Split Sampling" is checked yes, provide the name of lab(s) being used by the PRP, Federal Facility, etc.

27. **Email for Lab Assignments:** E-mail address(es) that the lab assignments should be sent to.

28. **Email for Data:** E-mail address(es) (other than EPA Project Manager) to which validated data and data assessments should be sent. Please note all CLP data will be sent in electronic formats.

Note: The Region does NOT provide Hard Copy data any longer.

29. **Contaminants of Concern:** List any know contaminants of interest/concern for the specific site.

30. **Known Hazardous Waste Constituents:** List any know hazardous wastes/contaminants at the site that the lab should know about for Health and Safety or Disposal purposes (i.e. radionuclides, PCBs, asbestos, etc.)

31. **Special Requests & Reporting Requirements:** Provide any information regarding special project requirements that the lab(s) need to know to meet project specific requirements. These can include, but are not limited to: lower or higher CRQLs, additional compounds outside the standard TCL/TAL lists; high concentration samples; sample volume concerns; canister needs (for TO-15 air samples), etc. Attach additional pages if more space is required other than what is provide on the request form.

Requested Analysis

34. **Site Name:** Provide site name, *again*, on the top of the analytical request table.

35. **# of Samples:** Provide the number of samples per matrix per analysis. Include relevant QC samples (trip blanks, field duplicates, rinsate blanks, etc.)

36. **Concentration Level** **Drop Down List** - Designate the anticipated concentration for the samples to be analyzed.

37. **Matrix:** **Drop Down List** - Provide the matrix (i.e., soil, aqueous, oil, air, etc.) for the samples being collected.

38. **Analysis** **Drop Down List** - Provide the required analyses from the drop down list (i.e., VOA, Pesticide, PCBs, etc.). If the required analysis can not be found in the drop down list, the field can be manually populated. Please, list *only* one analysis per line.

39. **Turnaround Time:** Turnaround time should be the total turnaround time (TAT), expressed in DAYS, needed for the receipt of validated data by the EPA PM and/or their designee. Please note that the available total TATs are 14, 28, or 42 days for routine analytical service (RAS). That is 7, 14, or 21 days for the laboratory to perform the analyses, and similar amount of time for data review and validation. Similarly, the total TAT for Dioxins/Furans and CB Congeners analyses is 70 days.

40. **SOW/Method:** Provide the project required analytical method needed (i.e. SOM01.2, ISM01.3, SW-846 Method 8260b, etc.) Enter only ONE method per line.

41. **Laboratory Assignment:** Please leave this column BLANK, for the CLP laboratory assigned to analyze each group of samples.

**** ANSETS data sheets with detailed information regarding sub-contracted analytical services are required to be submitted to the RSCC (Adly Michael and Jennifer Feranda) by the fifth (5th) of each month.**